FORM D

RECEIVED

1303376

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
2035PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

DATE RECEIVED

Name of Offering Offering of Membe	(☐ check if this is an a rship Interests of K2 Ins	amendment and name		ndicate change.)	f.	200	3396
	box(es) that apply):	Rule 504	☐ Rule 505	⊠ Rule 506	☐ Section 4	4 (6) □ U	LOE
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			CIDENTIFICAT	ION DATA			THE FROM THE
1. Enter the inform	nation requested about th	e issuer					
Name of Issuer K2 Insitutional Inve		mendment and name h	nas changed, and ir	dicate change.	05	073024	
Address of Executive c/o K2/D&S Manag	e Offices ement Co., L.L.C., 300 A	utlantic Street, 12 th Flo	,	et, City, State, Zip C 06901	ode) Telepho 203 348	•	ncluding Area Code)
Address of Principal			(Number and Stre	et, City, State, Zip C	ode) Telepho	ne Number (I	ncluding Area Code)
Brief Description of	Business: Private Ir	vestment Company				ş	PROCESSEL
Type of Business O	rganization						DEC 1 6 2005
	□ corporation	🔲 limited p	partnership, already	formed	🛛 other (plea	ase specify)	DEC 1 0 2000
	☐ business trust	☐ limited p	partnership, to be fo	rmed	Limited Liabili	ity Company	THOMSON_
			Month	Yea	ar		FINANCIAL
Actual or Estimated	Date of Incorporation or 0	Organization:	0 6	0	4	⊠ Actual	Estimated
Jurisdiction of Incorp	poration or Organization:	(Enter two-letter U.S. F	Postal Service Abbr	eviation for State;			 -1
		CI	N for Canada; FN fo	or other foreign jurisc	diction)	DE	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number

UMS

Each beneficial ownEach executive office	ne issuer, if the iss ner having the por- cer and director o	suer has been organized wit wer to vote or dispose, or di			a class of equity securities of the issuer; rtnership issuers; and
Check Box(es) thất Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first,	if individual):	K2/D&S Managemen	t Co., L.L.C.		
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): 300 Atlantic Stree	t, 12 th Floor, Stam	nford, CT 06901
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first,	if individual):	Douglass III, William	A.		
Business or Residence Add Stamford, CT 06901	ress (Number and	d Street, City, State, Zip Coo	de): c/o K2/D&S Manag	gement Co., L.L.C	C., 300 Atlantic Street, 12th Floor,
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	Saunders, David C.			
Business or Residence Add Stamford, CT 06901	ress (Number and	Street, City, State, Zip Coo	de): c/o K2/D&S Mana	gement Co., L.L.C	C., 300 Atlantic Street, 12th Floor,
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	Christie, Stephanie	, M. () , C. ()		
Business or Residence Add Stamford, CT 06901	ress (Number and	d Street, City, State, Zip Coo	de): c/o K2/D&S Mana	gement Co., L.L.C	C., 300 Atlantic Street, 12th Floor,
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	K2 Insitutional inves	tors II, Ltd.	***************************************	
Business or Residence Add 173 Road Town, Tortola, E		d Street, City, State, Zip Coo	de): c/o S-HR&M Finar	ncial Services Lin	nited, Kingston Chambers, PO Box
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):				
Business or Residence Add	ress (Number and	d Street, City, State, Zip Coo	de):		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):				
Business or Residence Add	ress (Number and	d Street, City, State, Zip Coo	de):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):				
Business or Residence Add	lress (Number and	d Street, City, State, Zip Coo	de):	,	
Chack Boy(es) that Apply:	☐ Promoter	☐ Repeticial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner

A. BASIC IDENTIFICATION DATA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

						B. I	INFORM	IATION	ABOUT	OFFER	ING			
1.	Has the iss	uer so	old, or de	oes the is:	suer intend	d to sell, to	non-accre	edited inve	stors in th	is offering	?		☐ Yes	⊠ No
			,			Answer a	also in App	endix, Col	umn 2, if f	iling under	ULOE			
2.	What is the					•	•							000,000*
					······	<u></u>			••••		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u>*M</u> a	y be waived
3.	Does the o	ffering	permit	joint owne	ership of a	single uni	t?			••••••				□No
;	Enter the in any commin offering. If and/or with associated	ssion o a pers a stat	or simila son to b te or sta	ar remune e listed is ites, list th	ration for s an associa e name of	solicitation ated perso the broke	of purchas n or agent r or dealer	sers in con t of a broke . If more t	inection wi er or deale han five (5	th sales of r registere b) persons	f securities d with the to be liste	s in the SEC d are		
Full N	lame (Last	name	first, if	individual))									
Busin	ess or Res	idence	e Addre	ss (Numb	er and Str	eet, City, S	State, Zip (Code)		· · · · · · · · · · · · · · · · · · ·	144.00			
Name	e of Associ	ated B	roker o	r Dealer										
	s in Which													
	(Check "All L] [Al					s)[CO]					☐ [GA]	☐ (HI)		☐ All States
[A		•] [IA]							_		☐ [MS]		
			_			[LA]		[MD][NC]					[MO] □ [PA]	
				☐ [NH]	[LN] [XT]					[M∧]			,	
									[11,1]					
Full	lame (Last	name	e iirst, ii	individuai)									
Busir	ess or Res	idence	e Addre	ss (Numb	er and Str	eet, City, S	State, Zip (Code)						
Name	e of Associ	ated B	Iroker o	r Dealer								··-		
	s in Which (Check "All													☐ All States
□ [A	_					[CO]				[FL]	☐ [GA]	☐ (HI)	[ID]	☐ All Otates
] [IA]	[KS]		□ [LA]						[MS]		
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 □ [R								[VA]						
	lame (Last	name	first, if	individual										
Busir	ness or Res	idenc	e Addre	ss (Numb	er and Str	eet, City, S	State, Zip (Code)						
Nam	e of Associ	ated B	Broker o	r Dealer										
State	s in Which	Perso	n Listed	d Has Soli	cited or In	tends to Se	olicit Purch	nasers				-		
	(Check "All		_			•						· · · · · · · · · · · · · · · · · · ·	-	☐ All States
[A] [AZ]			[CO]					[GA]	[HI]	[ID]	
□ [II			[IA]		☐ [KY]	☐ [LA]		☐ [MD]			☐ [MN]			
/I] []	/T] [TN	E] [] [NV]	[HN]	[NJ]	□ [NM]	[NY]	□ [NC]	□ [ND]	[HO]	□ [OK]	□ [OR]	□ [PA]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	ND U	SE OF PROCE	EDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$		\$	
	Equity	\$		<u>\$</u>	
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$		<u>\$</u>	
	Partnership Interests	\$		\$	
	Other (Specify) Membership Interests)	\$	900,000,000	\$	523,569,222
	Total	\$	900,000,000	\$	523,569,222
	Answer also in Appendix, Column 3, if filing under ULOE			- —	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount Of Purchases
	Accredited Investors		2	<u>\$</u>	523,569,222
	Non-accredited Investors	·	n/a	<u>\$</u>	n/a
	Total (for filings under Rule 504 only)		0_	<u>\$</u>	0
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C–Question 1.				
	Type of Offering		Types of Security		Dollar Amount Sold
	Rule 505		n/a	\$	n/a
	Regulation A		n/a	<u>\$</u>	n/a
	Rule 504		n/a	<u>\$</u>	n/a
	Total		n/a	<u>\$</u>	n/a
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		🗖	\$	
	Printing and Engraving Costs		🗆	\$	
	Legal Fees		🛛	\$	10,000
	Accounting Fees	••••••	🗆	\$	
	Engineering Fees.		🗆	\$	
	Sales Commissions (specify finders' fees separately)		🗆	<u>\$</u>	st
	Other Expenses (identify)		🗆	<u>\$</u> _	
	Tabel		F 21	æ	10.000

4	b.Enter the difference between the aggregate offering price given in response to Part C–Q and total expenses furnished in response to Part C–Question 4.a. This difference is the "a gross proceeds to the issuer."			\$899,990,000			
5	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed used for each of the purposes shown. If the amount for any purpose is not known, furnish estimate and check the box to the left of the estimate. The total of the payments listed muthe adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b. at	to be an st equal	Payme Offic Directe Affilia	ers, ors &		Payme Othe	
	Salaries and fees		\$	0		\$	0
	Purchase of real estate		\$	0		\$	0
	Purchase, rental or leasing and installation of machinery and equipment		\$	0		\$	0
	Construction or leasing of plant buildings and facilities		\$	00		\$	0
	pursuant to a merger		\$	0		\$	0
	Repayment of indebtedness		\$	0		\$	0
	Working capital		\$	0	\boxtimes	\$899,99	90,000
	Other (specify):		\$	0		\$	0
			\$	0		\$	0
	Column Totals		\$	00	\boxtimes	\$899,99	90,000
	Total payments Listed (column totals added)		٥	\$ 8	99,99	000,00	
-	the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Ler (Print or Type) Signature			Da	te		
2	Institutional Investors II, L.L.C.			No	ovemb	oer 23,	2005
Vai	me of Signer (Print or Type) Title of Signer (Print or Type)					_	
	Chief Financial Offi	cer,K	2/D&S Man	g gemen	t Co.	, L.L.C	,its Ma
	ATTENTION						
_							
	Intentional misstatements or omissions of fact constitute federal cr	riminal vi	olations. (See	18 U.S.C.	1001.)		

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature (Date
K2 Institutional Investors II, L.L.		November 23, 2005
Name of Signer (Print or Type)	Title of Signer (Print &r Type)	
Stephanie Christie	Chief Financial Officer K2/D&S	Management Co. J. J. C. its mar

Instruction:

Print the names and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APP	ENDIX					
1		2	3			4		5		
	Intend to non-ac investors (Part B -	to sell ccredited in State	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)					
State	Yes	No	Membership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AK										
AZ										
AR										
CA										
СО										
СТ		Х	\$9000,000,000	1	\$50,000	0	\$0		Х	
DE										
DC	7									
FL	<u>-</u>				····		, i		_	
GA										
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IA										
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KY	i									
LA								 		
ME					·					
MD										
MA										
MN										
MS										
MO										
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				API	PENDIX					
1		2	3			4		5		
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	Intend to non-ac investors (Part B -	to sell ccredited s in State	Type of security and aggregate offering price offered in state (Part C Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)					
State	Yes	No	Membership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
MT										
NE										
NV										
NH										
NJ	i						No.			
NM										
NY										
NC										
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